

<i>SERFF Tracking Number:</i>	<i>SFCM-125995437</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Mutual Automobile Insurance Company</i>	<i>State Tracking Number:</i>	<i>41367</i>
<i>Company Tracking Number:</i>	<i>IH-LT(STATE ABBREVIATION)CI.1</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>LTCI Internet Rate Quote Pages</i>		
<i>Project Name/Number:</i>	<i>LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1</i>		

Filing at a Glance

Company: State Farm Mutual Automobile Insurance Company		
Product Name: LTCI Internet Rate Quote Pages	SERFF Tr Num: SFCM-125995437	State: ArkansasLH
TOI: LTC03I Individual Long Term Care	SERFF Status: Closed	State Tr Num: 41367
Sub-TOI: LTC03I.001 Qualified	Co Tr Num: IH-LT(STATE ABBREVIATION)CI.1	State Status: Filed-Closed
Filing Type: Advertisement	Co Status:	Reviewer(s): Marie Bennett
	Author: Tammie Mills	Disposition Date: 02/26/2009
	Date Submitted: 01/19/2009	Disposition Status: Filed
Implementation Date Requested:		Implementation Date:
State Filing Description:		

General Information

Project Name: LTCI Internet Rate Quote Pages	Status of Filing in Domicile: Pending
Project Number: IH-LT(state abbreviation)CI.1	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 02/26/2009	Explanation for Other Group Market Type:
	State Status Changed: 02/26/2009
Deemer Date:	Corresponding Filing Tracking Number:
Filing Description:	

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Long Term Care internet rate quote pages. These forms are being filed for informational purposes in your state.

Please note that we have filed the advertising material under SERFF number SFCM-125995327.

SERFF Tracking Number: SFCM-125995437 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367

Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: LTCI Internet Rate Quote Pages

Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Company and Contact

Filing Contact Information

Tammie Mills, Analyst tammie.mills.csag@statefarm.com
 One State Farm Plaza (309) 994-0300 [Phone]
 Bloomington, IL 61710-0001

Filing Company Information

State Farm Mutual Automobile Insurance Company CoCode: 25178 State of Domicile: Illinois
 One State Farm Plaza Group Code: 176 Company Type:
 Laura Walters / Marketing D-3
 Bloomington, IL 61710 Group Name: State ID Number:
 (309) 763-8104 ext. [Phone] FEIN Number: 37-0533100

Filing Fees

Fee Required? Yes
 Fee Amount: \$100.00
 Retaliatory? No
 Fee Explanation: \$25.00 per form & we are filing 4 different form numbers
 \$25.00 x 4 = \$100.00
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
State Farm Mutual Automobile Insurance Company	\$100.00	01/19/2009	25109051

SERFF Tracking Number:	SFCM-125995437	State:	Arkansas
Filing Company:	State Farm Mutual Automobile Insurance Company	State Tracking Number:	41367
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TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	LTCI Internet Rate Quote Pages		
Project Name/Number:	LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Marie Bennett	02/26/2009	02/26/2009
Filed	Marie Bennett	01/22/2009	01/22/2009

Amendments

Item	Schedule	Created By	Created On	Date Submitted
Insurance Coverage Information	Form	Tammie Mills	01/22/2009	01/22/2009

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
New filing numbers on the first two forms.	Note To Reviewer	Tammie Mills	02/17/2009	02/17/2009

SERFF Tracking Number:	SFCM-125995437	State:	Arkansas
Filing Company:	State Farm Mutual Automobile Insurance Company	State Tracking Number:	41367
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TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	LTCI Internet Rate Quote Pages		
Project Name/Number:	LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1		

Disposition

Disposition Date: 02/26/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SFCM-125995437 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367

Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: LTCI Internet Rate Quote Pages

Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Item Type	Item Name	Item Status	Public Access
Supporting Document	AR NAIC Transmittal-internet quote pages	Filed	Yes
Supporting Document	AR Cover Letter-Internet Quote pages	Filed	Yes
Form	Long Term Care Internet Pages w/message (pop-up) screens	Filed	Yes
Form	Home page for Rate Quote	Filed	Yes
Form	Actual Rate Quote page for Arkansas	Filed	Yes
Form	Long Term Care Insurance Quotes	Filed	Yes
Form	Insurance Coverage Information	Filed	Yes

<i>SERFF Tracking Number:</i>	<i>SFCM-125995437</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Mutual Automobile Insurance Company</i>	<i>State Tracking Number:</i>	<i>41367</i>
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<i>Product Name:</i>	<i>LTCI Internet Rate Quote Pages</i>		
<i>Project Name/Number:</i>	<i>LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1</i>		

Disposition

Disposition Date: 01/22/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: SFCM-125995437 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367

Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: LTCI Internet Rate Quote Pages

Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Item Type	Item Name	Item Status	Public Access
Supporting Document	AR NAIC Transmittal-internet quote pages	Filed	Yes
Supporting Document	AR Cover Letter-Internet Quote pages	Filed	Yes
Form	Long Term Care Internet Pages w/message (pop-up) screens	Filed	Yes
Form	Home page for Rate Quote	Filed	Yes
Form	Actual Rate Quote page for Arkansas	Filed	Yes
Form	Long Term Care Insurance Quotes	Filed	Yes
Form	Insurance Coverage Information	Filed	Yes

Note To Reviewer

Tammie Mills on 02/17/2009 12:56 PM

Tammie Mills

02/17/2009 12:56 PM

New filing numbers on the first two forms.

Thank you for reopening this filing.

We were notified by a state that we had originally filed IH-LTWELC.1 in 2004. We did some research and found that yes, we did file IH-LTWELC.1 in Arkansas (among other states) in 2004 & it was approved. We have now made a IH-LTWELC.2 which is now attached.

IH-LTARCI.2-please note that is being filed two times. The 1st time is the actual glossary pages and the pop-ups. The second time is the actual page within the flow. We wanted to make sure that you had all possible situations.

This filing was originally filed/closed on 1/22/2009 & the only thing that has changed is the form numbers on the above two forms.

Thank you for help and time. Any quesstions, please let me know at 1-309-994-0300.

SERFF Tracking Number: SFCM-125995437 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367

Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: LTCI Internet Rate Quote Pages

Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Amendment Letter

Amendment Date:

Submitted Date: 01/22/2009

Comments:

We are attaching an additional form schedule in regards to the Internet Rate Quote Pages. Please note that page three of the R14108 LTC Quote AR piece has a form number of IH-LTARCI2.2.

Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes:

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
IH-LTARCI2.2	Advertising	Insurance Coverage Information	Initial					R14108 LTC Quote CO w 180 w NFR v1.pdf

SERFF Tracking Number: SFCM-125995437 State: Arkansas

Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367

Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1

TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified

Product Name: LTCI Internet Rate Quote Pages

Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Form Schedule

Lead Form Number:

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	IH-LTARCI.1	Advertising	Long Term Care Internet Pages w/message (pop-up) screens	Initial			Glossary AR v1.pdf
Filed	IH-LTWELC.1	Advertising	Home page for Rate Quote	Initial			R14108 LTC Quote AR w 180 w NFR v1.pdf
Filed	IH-LTARCI.2	Advertising	Actual Rate Quote page for Arkansas	Initial			R14108 LTC Quote AR w 180 w NFR v1.pdf
Filed	IH-LTARRQ.2	Advertising	Long Term Care Insurance Quotes	Initial			R14108 LTC Quote AR w 180 w NFR v1.pdf
Filed	IH-LTARCI2.2	Advertising	Insurance Coverage Information	Initial			R14108 LTC Quote CO w 180 w NFR v1.pdf



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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

mm dd yyyy

Date of Birth: --

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☒ **Long-Term Care Insurance with No Inflation Protection (ages 30 thru 75)**
- ☐ **Long-Term Care Insurance with Simple Inflation Protection (ages 30 thru 60)**
- ☐ **Long-Term Care Insurance - Partnership with Compound Inflation Protection (ages 30 thru 79)**
- ☐ **Long-Term Care Insurance - Partnership with Simple Inflation Protection (ages 61 thru 79)**
- ☐ **Long-Term Care Insurance - Partnership with No Inflation Protection (ages 76 thru 79)**

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

☐ I have been given the opportunity to review the **Outline of Coverage** document for this product prior to obtaining a rate quote.

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LONG-TERM CARE INSURANCE

LONG-TERM CARE INSURANCE WITH NO INFLATION PROTECTION (AGES 30 THRU 75)

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30 thru 75.

Automatic inflation protection is not included in this policy, however, it does include a Future Purchase Option that is available at specified ages. This option allows you to increase your maximum daily benefit at an additional cost.

This policy does not provide Partnership program "asset disregard" in determining Medicaid eligibility as defined by your state.

See the Outline of Coverage for a complete description of benefits and limitations.

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

mm dd yyyy

Date of Birth: --

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ [Long-Term Care Insurance with No Inflation Protection \(ages 30 thru 75\)](#)
- ☒ [Long-Term Care Insurance with Simple Inflation Protection \(ages 30 thru 60\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Compound Inflation Protection \(ages 30 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Simple Inflation Protection \(ages 61 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with No Inflation Protection \(ages 76 thru 79\)](#)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

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LONG-TERM CARE INSURANCE
LONG-TERM CARE INSURANCE WITH 5% SIMPLE AUTOMATIC INCREASE BENEFIT (AGES 30 THRU 60)

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30 through 60.

Simple Automatic Increase benefit increases the Maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary to help your coverage keep pace with rising costs of services.

This policy does not provide Partnership program "asset disregard" in determining Medicaid eligibility as defined by your state.

See the Outline of Coverage for a complete description of benefits and limitations.

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

mm dd yyyy

Date of Birth: --

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ [Long-Term Care Insurance with No Inflation Protection \(ages 30 thru 75\)](#)
- ☐ [Long-Term Care Insurance with Simple Inflation Protection \(ages 30 thru 60\)](#)
- ☒ [Long-Term Care Insurance - Partnership with Compound Inflation Protection \(ages 30 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Simple Inflation Protection \(ages 61 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with No Inflation Protection \(ages 76 thru 79\)](#)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

- ☐ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

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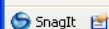
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LONG-TERM CARE INSURANCE - PARTNERSHIP LONG-TERM CARE INSURANCE - PARTNERSHIP WITH 5% COMPOUND AUTOMATIC INCREASE BENEFIT (AGES 30 -79)

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 30 through 79.

This policy qualifies as a Long-Term Care Insurance Partnership Program policy. This means that an amount of your assets equal to the dollar amount of long-term care insurance benefits paid under this policy will be disregarded for purposes of determining your eligibility for Medicaid, as defined by your state.

Compound Automatic Increase Benefit increases your previous Maximum Daily Benefit and your remaining Maximum Lifetime Benefit by 5% on each policy anniversary to help your coverage keep pace with rising costs of services. This is the required amount of inflation protection available for applicants aged 30 through 60 to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

mm dd yyyy

Date of Birth: --

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ [Long-Term Care Insurance with No Inflation Protection \(ages 30 thru 75\)](#)
- ☐ [Long-Term Care Insurance with Simple Inflation Protection \(ages 30 thru 60\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Compound Inflation Protection \(ages 30 thru 79\)](#)
- ☒ [Long-Term Care Insurance - Partnership with Simple Inflation Protection \(ages 61 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with No Inflation Protection \(ages 76 thru 79\)](#)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

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LONG-TERM CARE INSURANCE - PARTNERSHIP

LONG-TERM CARE INSURANCE - PARTNERSHIP WITH 5% SIMPLE

AUTOMATIC INCREASE BENEFIT (AGES 61-79)

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 61 through 79.

This policy qualifies as a Long-Term Care Insurance Partnership Program policy. This means that an amount of your assets equal to the dollar amount of long-term care insurance benefits paid under this policy will be disregarded for purposes of determining your eligibility for Medicaid, as defined by your state.

Simple Automatic Increase benefit increases the maximum Daily Benefit by 5% of the original amount and the remaining Maximum Lifetime Benefit amount increases on a proportional amount on each policy anniversary. This is the required amount of inflation protection available for applicants aged 61 through 75 to help your coverage keep pace with rising costs of services.

See the Outline of Coverage for a complete description of benefits and limitations.

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

mm dd yyyy

Date of Birth: - -

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ [Long-Term Care Insurance with No Inflation Protection \(ages 30 thru 75\)](#)
- ☐ [Long-Term Care Insurance with Simple Inflation Protection \(ages 30 thru 60\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Compound Inflation Protection \(ages 30 thru 79\)](#)
- ☐ [Long-Term Care Insurance - Partnership with Simple Inflation Protection \(ages 61 thru 79\)](#)
- ☒ [Long-Term Care Insurance - Partnership with No Inflation Protection \(ages 76 thru 79\)](#)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

- ☐ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

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LONG-TERM CARE INSURANCE - PARTNERSHIP

LONG-TERM CARE INSURANCE - PARTNERSHIP WITH NO INFLATION PROTECTION (AGES 76 - 79)

Insurance coverage for qualified long-term care services you may use when certified as Chronically Ill and need assistance to care for yourself. It is available for ages 76 through 79.

This policy qualifies as a Long-Term Care Insurance Partnership Program policy. This means that an amount of your assets equal to the dollar amount of long-term care insurance benefits paid under this policy will be disregarded for purposes of determining your eligibility for Medicaid, as defined by your state.

No inflation protection is provided by this policy or required for applicants aged 76 through 79.

See the Outline of Coverage for a complete description of benefits and limitations.

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Long-Term Care Insurance

The Long-Term Care Rate Quote will take about 5-10 minutes. If you are unfamiliar with long-term care and long-term care insurance, we suggest using the first link below to learn about the benefits and options right for you.

- 1) [Learn about long-term care and long-term care insurance](#)
- 2) If you're ready to get a rate quote, select your state below:

State/Province:

[Go](#)

The quotes generated by this program are not a contract, binder, or agreement to extend Long-Term Care insurance coverage and are based on the listed factors and the indicated underwriting criteria. The exact premium can only be determined after an underwriting review and may be different or the policy may not be available. Please contact a [State Farm agent](#) for further details.

Helpful Hints

- If you have disabled JavaScript in your browser, please enable it to complete this function. If you're unsure what JavaScript is, you're probably ok.
- **Please Note:** Online Long-Term Care insurance premium quotes may not be available in your state of residence or to individuals residing outside the U.S.
- To learn more, visit the [Long-Term Care Insurance](#) page.

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

Date of Birth: mm - dd - yyyy

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ Long-Term Care Insurance with No Inflation Protection (ages 30 - 75)
- ☐ Long-Term Care Insurance with Simple Inflation Protection (ages 30 - 60)
- ☐ Long-Term Care Insurance - Partnership with Compound Inflation Protection (ages 30 - 79)
- ☐ Long-Term Care Insurance - Partnership with Simple Inflation Protection (ages 61 - 79)
- ☐ Long-Term Care Insurance - Partnership with No Inflation Protection (ages 76 - 79)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

- ☒ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

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Long-Term Care Insurance Coverage Information

The rate quote you receive is based on the selections you make below. If you have any questions regarding the correct selections for your situation, please contact a local [State Farm agent](#). You can also obtain more information from our [Long-Term Care Insurance](#) page.

Type of Policy:	Long-Term Care Insurance	See Detailed Definitions
		See Detailed Definition... ▾
		See Detailed Definition...
		Daily Benefit
		Benefit Factor
		Elimination Period
		Nonforfeiture Benefit

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid (subject to certain restrictions), select the nonforfeiture benefit .	<input type="radio"/> Yes <input type="radio"/> No

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$801.00 Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy \$1,143.00 Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

Select Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$891.00 Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy \$1,272.00 Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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Policy Information

Policy: Long-Term Care Insurance

General Information

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State/Province: Arkansas

Date of Birth: 04-05-1956

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Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

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Long-Term Care Insurance Quote (Policy Form 97061 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$801.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy - Partnership \$1,143.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

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Policy Information

Policy: Long-Term Care Insurance

General Information

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State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

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Long-Term Care Insurance Quote (Policy Form 97061 Series)

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Policy Information

Policy: Long-Term Care Insurance

General Information

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State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

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Policy Information

Policy: Long-Term Care Insurance

General Information

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State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

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Long-Term Care Insurance

The Long-Term Care Rate Quote will take about 5-10 minutes. If you are unfamiliar with long-term care and long-term care insurance, we suggest using the first link below to learn about the benefits and options right for you.

- 1) [Learn about long-term care and long-term care insurance](#)
- 2) If you're ready to get a rate quote, select your state below:

State/Province:

[Go](#)

The quotes generated by this program are not a contract, binder, or agreement to extend Long-Term Care insurance coverage and are based on the listed factors and the indicated underwriting criteria. The exact premium can only be determined after an underwriting review and may be different or the policy may not be available. Please contact a [State Farm agent](#) for further details.

Helpful Hints

- If you have disabled JavaScript in your browser, please enable it to complete this function. If you're unsure what JavaScript is, you're probably ok.
- **Please Note:** Online Long-Term Care insurance premium quotes may not be available in your state of residence or to individuals residing outside the U.S.
- To learn more, visit the [Long-Term Care Insurance](#) page.

[Return to Quotes Home](#)

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

Date of Birth: mm - dd - yyyy

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ Long-Term Care Insurance with No Inflation Protection (ages 30 - 75)
- ☐ Long-Term Care Insurance with Simple Inflation Protection (ages 30 - 60)
- ☐ Long-Term Care Insurance - Partnership with Compound Inflation Protection (ages 30 - 79)
- ☐ Long-Term Care Insurance - Partnership with Simple Inflation Protection (ages 61 - 79)
- ☐ Long-Term Care Insurance - Partnership with No Inflation Protection (ages 76 - 79)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

☒ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

Continue



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Long-Term Care Insurance Coverage Information

The rate quote you receive is based on the selections you make below. If you have any questions regarding the correct selections for your situation, please contact a local [State Farm agent](#). You can also obtain more information from our [Long-Term Care Insurance](#) page.

Type of Policy:	Long-Term Care Insurance	See Detailed Definitions
		See Detailed Definition... ▾
		See Detailed Definition...
		Daily Benefit
		Benefit Factor
		Elimination Period
		Nonforfeiture Benefit

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid (subject to certain restrictions), select the nonforfeiture benefit .	<input type="radio"/> Yes <input type="radio"/> No

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

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Policy Information

Policy: Long-Term Care Insurance

General Information

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State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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Policy Information

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State/Province: Arkansas

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Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

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Long-Term Care Insurance Quote (Policy Form 97061 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$801.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy - Partnership \$1,143.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

Select Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$891.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy - Partnership \$1,272.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

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Long-Term Care Insurance

The Long-Term Care Rate Quote will take about 5-10 minutes. If you are unfamiliar with long-term care and long-term care insurance, we suggest using the first link below to learn about the benefits and options right for you.

- 1) [Learn about long-term care and long-term care insurance](#)
- 2) If you're ready to get a rate quote, select your state below:

State/Province:

[Go](#)

The quotes generated by this program are not a contract, binder, or agreement to extend Long-Term Care insurance coverage and are based on the listed factors and the indicated underwriting criteria. The exact premium can only be determined after an underwriting review and may be different or the policy may not be available. Please contact a [State Farm agent](#) for further details.

Helpful Hints

- If you have disabled JavaScript in your browser, please enable it to complete this function. If you're unsure what JavaScript is, you're probably ok.
- **Please Note:** Online Long-Term Care insurance premium quotes may not be available in your state of residence or to individuals residing outside the U.S.
- To learn more, visit the [Long-Term Care Insurance](#) page.

[Return to Quotes Home](#)

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Arkansas**

Date of Birth: mm - dd - yyyy

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ Long-Term Care Insurance with No Inflation Protection (ages 30 - 75)
- ☐ Long-Term Care Insurance with Simple Inflation Protection (ages 30 - 60)
- ☐ Long-Term Care Insurance - Partnership with Compound Inflation Protection (ages 30 - 79)
- ☐ Long-Term Care Insurance - Partnership with Simple Inflation Protection (ages 61 - 79)
- ☐ Long-Term Care Insurance - Partnership with No Inflation Protection (ages 76 - 79)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

- ☒ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

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Long-Term Care Insurance Coverage Information

The rate quote you receive is based on the selections you make below. If you have any questions regarding the correct selections for your situation, please contact a local [State Farm agent](#). You can also obtain more information from our [Long-Term Care Insurance](#) page.

Type of Policy:	Long-Term Care Insurance	See Detailed Definitions
		See Detailed Definition... ▾
		See Detailed Definition...
		Daily Benefit
		Benefit Factor
		Elimination Period
		Nonforfeiture Benefit

Select the daily amount to be paid, known as the daily benefit amount.	<input type="text"/>
Select the number of years your policy will provide benefits, known as the benefit factor .	<input type="text"/>
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .	<input type="radio"/> 30 days <input type="radio"/> 90 days <input type="radio"/> 180 days
To have coverage continue if premiums are not paid (subject to certain restrictions), select the nonforfeiture benefit .	<input type="radio"/> Yes <input type="radio"/> No

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$801.00 Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy \$1,143.00 Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

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Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$891.00 Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy \$1,272.00 Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

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Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$891.00 Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy - Partnership \$1,272.00 Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Arkansas

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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Long-Term Care Insurance

The Long-Term Care Rate Quote will take about 5-10 minutes. If you are unfamiliar with long-term care and long-term care insurance, we suggest using the first link below to learn about the benefits and options right for you.

- 1) [Learn about long-term care and long-term care insurance](#)
- 2) If you're ready to get a rate quote, select your state below:

State/Province:

[Go](#)

The quotes generated by this program are not a contract, binder, or agreement to extend Long-Term Care insurance coverage and are based on the listed factors and the indicated underwriting criteria. The exact premium can only be determined after an underwriting review and may be different or the policy may not be available. Please contact a [State Farm agent](#) for further details.

Helpful Hints

- If you have disabled JavaScript in your browser, please enable it to complete this function. If you're unsure what JavaScript is, you're probably ok.
- **Please Note:** Online Long-Term Care insurance premium quotes may not be available in your state of residence or to individuals residing outside the U.S.
- To learn more, visit the [Long-Term Care Insurance](#) page.

[Return to Quotes Home](#)

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Long-Term Care Insurance Coverage Information

To get the most accurate rate quote, please answer all the questions completely.

State/Province: **Colorado**

Date of Birth: mm - dd - yyyy

(Please note: The premiums for long-term care insurance are based on a number of factors, including your age. Waiting until after your next birthday to purchase long-term care insurance may result in higher premiums.)

Select coverage type:

- ☐ Long-Term Care Insurance with No Inflation Protection (ages 30 - 75)
- ☐ Long-Term Care Insurance with Simple Inflation Protection (ages 30 - 60)
- ☐ Long-Term Care Insurance - Partnership with Compound Inflation Protection (ages 30 - 79)
- ☐ Long-Term Care Insurance - Partnership with Simple Inflation Protection (ages 61 - 79)
- ☐ Long-Term Care Insurance - Partnership with No Inflation Protection (ages 76 - 79)

Please click on the link below to review the Outline of Coverage. The Outline of Coverage provides detailed information about the Long-Term Care Insurance policy.

When you are finished reviewing the Outline of Coverage, click on the "Continue" button.

- ☒ I have been given the opportunity to review the [Outline of Coverage](#) document for this product prior to obtaining a rate quote.

[Continue](#)



Adobe Acrobat Reader is required to view several links listed throughout this site. To download your free copy, click on the Get Adobe Acrobat Reader logo to the left.

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Long-Term Care Insurance Coverage Information

The rate quote you receive is based on the selections you make below. If you have any questions regarding the correct selections for your situation, please contact a local [State Farm agent](#). You can also obtain more information from our [Long-Term Care Insurance](#) page.

Type of Policy:	Long-Term Care Insurance	See Detailed Definitions
		See Detailed Definition...
		See Detailed Definition...
Select the daily amount to be paid, known as the daily benefit amount.		Daily Benefit
Select the number of years your policy will provide benefits, known as the benefit factor .		Benefit Factor
Select a period of time for which you receive covered qualified Long-Term Care services before payment begins, known as the elimination period .		Elimination Period
To have coverage continue if premiums are not paid (subject to certain restrictions), select the nonforfeiture benefit .		Nonforfeiture Benefit

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$801.00 Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy \$1,143.00 Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

Select Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$891.00 Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy \$1,272.00 Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Colorado

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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Long-Term Care Insurance Quote (Policy Form 97060 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy \$801.00 Simple Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy \$1,143.00 Simple Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Colorado

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

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Long-Term Care Insurance Quote (Policy Form 97061 Series)

Thank you for your interest in Long-Term Care Insurance. This is a no obligation rate quote. There are factors that may affect your eligibility for Long-Term Care Insurance.

Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$801.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy - Partnership \$1,143.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

Select Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$193.05 with Spousal Discount \$275.60 without Spousal Discount Semi-annually: \$1,158.30 with Spousal Discount \$1,653.60 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$891.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$267.30 Semi-annual Premium \$1,158.30 Without Spousal Discount Base Policy - Partnership \$1,272.00 Compound Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$381.60 Semi-annual Premium \$1,653.60

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Colorado

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

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Long-Term Care Insurance Quote (Policy Form 97061 Series)

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Preferred Rate	Quote Summary
Monthly with <u>State Farm Payment Plan</u> \$173.55 with Spousal Discount \$247.65 without Spousal Discount Semi-annually: \$1,041.30 with Spousal Discount \$1,485.90 without Spousal Discount Please note: An additional service charge may be required if the monthly payment option is selected. The Spousal Discount is available in some states if your spouse is eligible and applies for Long-Term Care Insurance. To discuss this quote with the State Farm agent of your choice, click below. Continue Date Quoted 04/07/2008	With Spousal Discount Base Policy - Partnership \$801.00 Simple Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$240.30 Semi-annual Premium \$1,041.30 Without Spousal Discount Base Policy - Partnership \$1,143.00 Simple Inflation Benefit Optional Riders/Benefits Non-Forfeiture \$342.90 Semi-annual Premium \$1,485.90

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Colorado

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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Policy Information

Policy: Long-Term Care Insurance

General Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

State/Province: Colorado

Date of Birth: 04-05-1956

Edit

Coverage Information

You may change the information provided to get a new quote by clicking the **Edit** button below.

Daily Benefit: \$300.00

Elimination Period: 90 days

Benefit Factor: 10 years

Nonforfeiture Benefit Rider: Yes

Edit

If you would like to discuss this quote with a State Farm agent of your choice, click the continue button.

Continue

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<i>SERFF Tracking Number:</i>	<i>SFCM-125995437</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>State Farm Mutual Automobile Insurance</i>	<i>State Tracking Number:</i>	<i>41367</i>
	<i>Company</i>		
<i>Company Tracking Number:</i>	<i>IH-LT(STATE ABBREVIATION)CI.1</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>LTCI Internet Rate Quote Pages</i>		
<i>Project Name/Number:</i>	<i>LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1</i>		

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: SFCM-125995437 State: Arkansas
Filing Company: State Farm Mutual Automobile Insurance Company State Tracking Number: 41367
Company Tracking Number: IH-LT(STATE ABBREVIATION)CI.1
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified
Product Name: LTCI Internet Rate Quote Pages
Project Name/Number: LTCI Internet Rate Quote Pages/IH-LT(state abbreviation)CI.1

Supporting Document Schedules

	Review Status:	
Satisfied -Name: AR NAIC Transmittal-internet quote pages	Filed	02/26/2009

Comments:

Attachment:

AR NAIC Transmittal Form-Internet Quote pages.pdf

	Review Status:	
Satisfied -Name: AR Cover Letter-Internet Quote pages	Filed	02/26/2009

Comments:

Attachment:

AR Cover LTR-Internet Pages-Rate Quotes.pdf

Life, Accident & Health, Annuity, Credit Transmittal Document (Revised 1/1/06)

1.	Prepared for the State of	Arkansas
----	---------------------------	----------

2.	Department Use Only				
	State Tracking ID				

3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #
	State Farm Mutual Automobile Insurance Company One State Farm Plaza Bloomington, IL 61710-0001	Illinois			176-25178	37-0533100

4.	Contact Name & Address	Telephone #	Fax #	E-mail Address
	Tammie Mills One State Farm Plaza/Marketing Compliance-B2 Bloomington, IL 61710-0001	309-994-0300	309-766-8483	tammie.mills.csag@statefarm.com

5.	Requested Filing Mode	X Review & Approval	<input type="checkbox"/> File & Use	<input type="checkbox"/> Informational
		<input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____		

6.	Company Tracking Number
----	-------------------------

7.	X New Submission	<input type="checkbox"/> Resubmission	Previous file # _____
----	------------------	---------------------------------------	-----------------------

8.	Market	X Individual	<input type="checkbox"/> Franchise	
		<input type="checkbox"/> Small	<input type="checkbox"/> Large	<input type="checkbox"/> Small and Large
		<input type="checkbox"/> Employer	<input type="checkbox"/> Association	<input type="checkbox"/> Blanket
		<input type="checkbox"/> Discretionary	<input type="checkbox"/> Trust	
		<input type="checkbox"/> Other: _____		

9.	Type of Insurance	Partnership Material for Long-Term Care-Internet Quote Pages
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10.	Product Coding Matrix Filing Code
-----	-----------------------------------

11.	Submitted Documents	<input type="checkbox"/> FORMS		
		<input type="checkbox"/> Policy	<input type="checkbox"/> Outline of Coverage	<input type="checkbox"/> Certificate
		<input type="checkbox"/> Application/Enrollment	<input type="checkbox"/> Rider/Endorsement	X Advertising
		<input type="checkbox"/> Schedule of Benefits	<input type="checkbox"/> Other	
		Rates <input type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate		
		<input type="checkbox"/> FILING OTHER THAN FORM OR RATE: Please explain: _____		
		SUPPORTING DOCUMENTATION		
		<input type="checkbox"/> Articles of Incorporation	<input type="checkbox"/> Third Party Authorization	
		<input type="checkbox"/> Association Bylaws	<input type="checkbox"/> Trust Agreements	
		<input type="checkbox"/> Statement of Variability	<input type="checkbox"/> Certifications	
		<input type="checkbox"/> Actuarial Memorandum		
		<input type="checkbox"/> Other _____		

12.	Filing Submission Date	January 19, 2009	
13	Filing Fee (If required)	Amount	\$100.00
		Check Date	
		Retaliatory	<input type="checkbox"/> Yes X No
		Check Number	
14.	Date of Domiciliary Approval	pending	
15.	Filing Description:		
	Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Long Term Care internet rate quote pages. These forms are being filed for informational purposes in your state.		

16.	Certification (If required)	
I HEREBY CERTIFY that I have reviewed the applicable filing requirements for this filing, and the filing complies with all applicable statutory and regulatory provisions for the state of <u>Arkansas</u> .		
Print Name		Mary F. Keim
Title		Assistant Secretary/Treasure
Signature		Mary F. Keim
Date:		1/19/2009

17.	Form Filing Attachment	
This filing transmittal is part of company tracking number		IH-LT(state abbreviation)CI.1
This filing corresponds to rate filing company tracking number		

	Document Name	Form Number		Replaced Form Number
	Description			Previous State Filing Number
01	Long Term Care Internet Pages w/message (pop-up) screens	IH-LTARCI.1	X Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
02	Home Page for Rate Quote	IH-LTWELC.1	X Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
03	Actual Rate Quote page for Arkansas	IH-LTARCI.2	X Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
04	Long Term Care Insurance Quotes	IH-LTARRQ.2	X Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
05			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
06			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
07			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
08			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
09			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	
10			Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other _____	

LH FFA-1

**State Farm Mutual Automobile
Insurance Company**

Home Office, Bloomington, Illinois 61710



January 19, 2009

Julie Benafield-Bowman
Commissioner of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Re: State Farm Mutual Automobile Insurance Company
Individual Accident and Health
NAIC #176-25178
Internet Glossary Pages & Rate Quotes for Arkansas Long Term Care Partnership
Materials

Forms:

IH-LTARCI.1	Long Term Care Internet Pages w/message (pop-up) screens
IH-LTWELC.1	Home Page for Rate Quote
IH-LTARCI.2	Actual Rate Quote page for Arkansas
IH-LTARRQ.2	Long Term Care Insurance Quotes

Enclosed for filing on behalf of the State Farm Mutual Automobile Insurance Company of Bloomington, Illinois are the referenced Long Term Care internet rate quote pages. These forms are being filed for informational purposes in your state.

The format and colors that are on the internet pages are variable and may change from year to year.

Sincerely,

A handwritten signature in cursive script that reads "Mary F. Keim".

Mary F. Keim
Manager Life/Health Contracts and Compliance
(309) 766-8422
FAX (309) 766-8483
Email-mary.f.keim.a0eb@statefarm.com